



**Louisiana Department of Environmental Quality
Permits Division, Solid and Hazardous Waste Permits Section
Post Office Box 4313
Baton Rouge, Louisiana 70821-4313
Phone Number (225) 219-0967**

SOLID WASTE TRANSPORTER NOTIFICATION FORM

*(Separate Form for Industrial Solid Waste Generators, Processors,
Disposers, Sewage Sludge (Biosolids) Transporters and Waste Tire Transporters)*

Please use the following mailing information:

LDEQ – Solid and Hazardous Waste Permits Section

Attn: Suzanne Bordelon

P. O. Box 4313 (70821-4313)

Baton Rouge, LA 70802

Fees: Initial: \$132 plus \$33 per vehicle

Make checks payable to LDEQ (Fees exempt if hauling less than 100 tons per year)

Applicant Information (Print legibly or type)

1. Name of Transporter:	3. Contact Name & Title:
2. Transporter Mailing Address:	4. Contact Phone/Fax:
City, State, Zip:	5. Parish:
6. Physical Location/Street Address:	City/State/Zip:

7. Waste to be Transported: *(Check each applicable line or box)*

Industrial Waste _____

Special Waste

Asbestos

Medical Waste

Grease Waste

Other, describe: _____

Residential & Commercial Waste _____

Woodwaste _____

Construction/Demolition Debris _____

8. Please list all vehicles that will be used to transport solid waste, including make, model, year, license number, and name of registered owner, if different from transporter.

MAKE	MODEL	YEAR	LICENSE NUMBER	REGISTERED OWNER

9. Certification: I have personally examined and I am familiar with the information submitted, and I hereby certify under penalty of law that this information is true, accurate, and complete to the best of my knowledge. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Authorized Signature

Printed Name and Title

Date

SOLID WASTE TRANSPORTER NOTIFICATION FORM INSTRUCTIONS

These instructions explain each item on the **Notification Form** and the information or response to be entered. Please type or print in black ink all entries **except for "Signature"**, which must be signed in ink. If necessary, use additional sheets or documents to fully answer any questions.

Fees: Initial: \$132 plus \$33 per vehicle.

Make checks payable to LDEQ at P.O. Box 4313, Baton Rouge, Louisiana 70821-4313.

DEQ contact phone number is (225) 219-0967. (Fees are exempt if hauling less than 100 tons per year)

1. **Name of Transporter:** Enter the name of the Transporter that collects and transports solid waste.

Transporter – any person who moves industrial solid waste off-site and/or who moves solid waste of a commercial establishment or more than one household to a storage, processing, or disposal facility.

2. **Mailing Address:** Enter the mailing address for the Transporter. This office will mail all site related correspondence to this address.

3. **Contact:** Enter the name and title of the person that can answer any questions.

4. **Contact Phone/Fax Number:** Enter phone and fax numbers of person entered in number 3 of the form.

5. **Parish:** Enter the parish in which the trucks/ transporter are located.

6. **Physical Location:** Actual Location of the site. Enter the street address (**not Post Office Box**); highway number; or other specific identifiers, and the city and state in which the information on this form applies. If the mailing address (**Item Number 2**) and the site location are the same, insert **"Same as Number 2"** after **"Physical Location" in Item Number 6.**

7. **Waste Types:**

Industrial solid wastes – wastes generated by or contaminated with waste from a manufacturing, industrial or mining process.

Residential or commercial solid waste – waste generated by households or commercial businesses.

Construction/demolition debris or woodwaste.

Special Wastes – wastes requiring special handling or disposal.

8. List all vehicles that will be used to transport solid waste, including make, model, year, license number, and name of registered owner, if different from transporter.

9. **Certification:** Provide the signature, typed name, and title of the individual authorized to sign the application, and the date of signature.